

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

MY AMERICA INC

ADDRESS (number and street)

2803 GULF TO BAY BLVD

STE 421

☐ Check if different than previously reported. (ACC)

CLEARWATER

FL

33759

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00494799

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☒ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2013

through

M M M / D D D / Y Y Y Y Y Y  
12 31 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Khurrum Wahid

Signature of Treasurer

Khurrum Wahid

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
01 29 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
OnlyFEC FORM 3X  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

MY AMERICA INC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 07 / 01 / 2013

To:

 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2013		1165.12
(b) Cash on Hand at Beginning of Reporting Period.....	917.74	
(c) Total Receipts (from Line 19) .....	6634.00	8114.20
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	7551.74	9279.32
7. Total Disbursements (from Line 31) .....	3233.77	4961.35
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	4317.97	4317.97
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**MY AMERICA INC**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
07		01		2013

To:

M M	/	D D	/	Y Y Y Y Y
12		31		2013

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

5650.00

5650.00

(ii) Unitemized .....

984.00

2464.20

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

6634.00

8114.20

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ►

6634.00

8114.20

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ►

6634.00

8114.20

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ►

6634.00

8114.20

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	3233.77	4961.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3233.77	4961.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3233.77	4961.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3233.77	4961.35

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	6634.00	8114.20
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6634.00	8114.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	3233.77	4961.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	3233.77	4961.35

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 18  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MY AMERICA INC**

Full Name (Last, First, Middle Initial)

## **A. Daisy Baez**

Mailing Address 11 Malaga Ave

City State Zip Code  
Coral Gables FL 33136

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Elements Behavioral Health

Occupation  
Director of Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 04 / 2013

Transaction ID : SA11AI.4394

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

## **B. Martha Baker**

Mailing Address 1685 Cleveland Rd

City State Zip Code  
Miami Beach FL 33141

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SEIU - Local 1991

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 06 / 2013

Transaction ID : SA11AI.4390

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

## **C. Tania Cruz**

Mailing Address 200 South Biscayne Blvd Suite 4100

City State Zip Code  
Miami FL 33131

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Squire, Sanders & Dempsey

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 29 / 2013

Transaction ID : SA11AI.4413

Amount of Each Receipt this Period

1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 18

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MY AMERICA INC**

Full Name (Last, First, Middle Initial)

## **A. Sally Heyman**

Mailing Address 111 NW 1st Street, Suite 220

City State Zip Code  
 Miami FL 33128-1963

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Miami-Dade County

Occupation

Commissioner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 29 / 2013

Transaction ID : SA11AI.4426

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

## **B. Indigo Media**

Mailing Address 2643 Gulf to Bay  
 Suite 1560-421

City State Zip Code  
 Clearwater FL 33759

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 15 / 2013

Transaction ID : SA11AI.4400

Amount of Each Receipt this Period

50.00

Contribution

Full Name (Last, First, Middle Initial)

## **C. Deanna Kirtman**

Mailing Address 3081 Calusa St

City State Zip Code  
 Miami FL 33133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Childrens Movement of Florida

Occupation

Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 06 / 2013

Transaction ID : SA11AI.4392

Amount of Each Receipt this Period

250.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 18

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MY AMERICA INC**

Full Name (Last, First, Middle Initial)

**A. Maria Molina**

Mailing Address 1717 N Bayshore Dr Apt 2056

City State Zip Code  
Miami FL 33132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Nova Consulting

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 29 / 2013

Transaction ID : SA11AI.4409

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Elizabeth Patino**

Mailing Address 550 Biltmore Way  
Suite 740

City State Zip Code  
Coral Gables FL 33134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Patino & Associates, P.A.

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 15 / 2013

Transaction ID : SA11AI.4453

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Rebekah Poston**

Mailing Address 200 South Biscayne Blvd  
Suite 4100

City State Zip Code  
Miami FL 33131

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Squire, Sanders & Dempsey

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 29 / 2013

Transaction ID : SA11AI.4398

Amount of Each Receipt this Period

1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2250.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 18

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MY AMERICA INC**

Full Name (Last, First, Middle Initial)

**A. Theresa Rice**

Mailing Address 236 Ponce De Leon Blvd

City

Coral Gables

State

FL

Zip Code

33134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

IGC

Occupation

Public Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 15 / 2013

**Transaction ID : SA11AI.4386**

Amount of Each Receipt this Period

350.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Terri Sonn**

Mailing Address 2999 NE 191st St #409

City

Miami

State

FL

Zip Code

33180

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sonn & Mittelman, P.A.

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 29 / 2013

**Transaction ID : SA11AI.4411**

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1350.00

5650.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

MY AMERICA INC

001

MY AMERICA INC

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

001

Age Group	Percentage
18-24	28.00
25-34	25.00
35-44	22.00
45-54	18.00
55-64	15.00
65-74	12.00
75-84	10.00
85+	5.00

MY AMERICA INC

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

001

295.41

MY AMERICA INC

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

425.41

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 18

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**MY AMERICA INC**

Full Name (Last, First, Middle Initial)

**A. AT&T Data**

Mailing Address PO Box 105503

City Atlanta    State GA    Zip Code 30348-5503

Purpose of Disbursement  
Phone Service

001

Candidate Name

**MY AMERICA INC**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 15 / 2013
**Transaction ID : SB21B.4348**

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**B. AT&T Data**

Mailing Address PO Box 105503

City Atlanta    State GA    Zip Code 30348-5503

Purpose of Disbursement  
Phone Service

001

Candidate Name

**MY AMERICA INC**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 23 / 2013
**Transaction ID : SB21B.4349**

Amount of Each Disbursement this Period

219.24

Full Name (Last, First, Middle Initial)

**C. AT&T Data**

Mailing Address PO Box 105503

City Atlanta    State GA    Zip Code 30348-5503

Purpose of Disbursement  
Phone Service

001

Candidate Name

**MY AMERICA INC**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 16 / 2013
**Transaction ID : SB21B.4350**

Amount of Each Disbursement this Period

30.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

279.24





**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MY AMERICA INC**

Full Name (Last, First, Middle Initial)

**A. Intuit Quickbooks**

Mailing Address 2700 Coast Avenue

City	State	Zip Code
Mountain View	CA	94043

Purpose of Disbursement  
Accounting Software

001

Candidate Name

**MY AMERICA INC**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		06		2013

**Transaction ID : SB21B.4357**

Amount of Each Disbursement this Period

19.95
-------

Full Name (Last, First, Middle Initial)

**B. Intuit Quickbooks**

Mailing Address 2700 Coast Avenue

City	State	Zip Code
Mountain View	CA	94043

Purpose of Disbursement  
Accounting Software

001

Candidate Name

**MY AMERICA INC**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2013

**Transaction ID : SB21B.4358**

Amount of Each Disbursement this Period

26.95
-------

Full Name (Last, First, Middle Initial)

**C. Intuit Quickbooks**

Mailing Address 2700 Coast Avenue

City	State	Zip Code
Mountain View	CA	94043

Purpose of Disbursement  
Accounting Software

001

Candidate Name

**MY AMERICA INC**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2013

**Transaction ID : SB21B.4359**

Amount of Each Disbursement this Period

19.95
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

66.85
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 18

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MY AMERICA INC**

Full Name (Last, First, Middle Initial)

**A. Intuit Quickbooks**

Mailing Address 2700 Coast Avenue

City Mountain View      State CA      Zip Code 94043

Purpose of Disbursement  
Accounting Software

001

Candidate Name

**MY AMERICA INC**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2013
**Transaction ID : SB21B.4360**

Amount of Each Disbursement this Period

26.95

Full Name (Last, First, Middle Initial)

**B. Intuit Quickbooks**

Mailing Address 2700 Coast Avenue

City Mountain View      State CA      Zip Code 94043

Purpose of Disbursement  
Accounting Software

001

Candidate Name

**MY AMERICA INC**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 03 / 2013
**Transaction ID : SB21B.4361**

Amount of Each Disbursement this Period

19.95

Full Name (Last, First, Middle Initial)

**C. Intuit Quickbooks**

Mailing Address 2700 Coast Avenue

City Mountain View      State CA      Zip Code 94043

Purpose of Disbursement  
Accounting Software

001

Candidate Name

**MY AMERICA INC**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 28 / 2013
**Transaction ID : SB21B.4362**

Amount of Each Disbursement this Period

26.95

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

73.85

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 18

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**MY AMERICA INC**

Full Name (Last, First, Middle Initial)

**A. Intuit Quickbooks**

Mailing Address 2700 Coast Avenue

City Mountain View      State CA      Zip Code 94043

Purpose of Disbursement  
Accounting Software

001

Candidate Name

**MY AMERICA INC**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 04 / 2013
**Transaction ID : SB21B.4363**

Amount of Each Disbursement this Period

19.95

Full Name (Last, First, Middle Initial)

**B. Intuit Quickbooks**

Mailing Address 2700 Coast Avenue

City Mountain View      State CA      Zip Code 94043

Purpose of Disbursement  
Accounting Software

001

Candidate Name

**MY AMERICA INC**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 29 / 2013
**Transaction ID : SB21B.4364**

Amount of Each Disbursement this Period

26.95

Full Name (Last, First, Middle Initial)

**C. Intuit Quickbooks**

Mailing Address 2700 Coast Avenue

City Mountain View      State CA      Zip Code 94043

Purpose of Disbursement  
Accounting Software

001

Candidate Name

**MY AMERICA INC**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2013
**Transaction ID : SB21B.4365**

Amount of Each Disbursement this Period

19.95

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

66.85



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

MY AMERICA INC

### A. Intuit Quickbooks

001

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

### B. Amanda Piter

003

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

### C. Shawna Vercher

Transaction ID : SB21B.4377

003

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

741.90

FEC Schedule B (Form 3X) Rev. 02/2003

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

MY AMERICA INC

### A. Shawna Vercher

Mailing Address 2643 Gulf to Bay  
Suite 1560-421

City	State	Zip Code
Clearwater	FL	33759

Purpose of Disbursement
Mileage Reimbursement

Candidate Name

MY AMERICA INC

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

The image shows three 10-pin D-sub connectors. The first connector is labeled 'M12' and has two pins labeled 'M' and 'M'. The second connector is labeled 'D11' and has two pins labeled 'D' and 'D'. The third connector is labeled 'Y2013' and has four pins labeled 'Y', 'Y', 'Y', and 'Y'.

Transaction ID : SB21B.4378

Amount of Each Disbursement this Period

322.05

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Date of Disbursement

Amount of Each Disbursement this Period

A diagram of a rectangular frame. It consists of a horizontal beam at the top and a horizontal beam at the bottom, connected by vertical supports. The top beam has 10 evenly spaced vertical hangers. The bottom beam has 10 evenly spaced vertical hangers. The left and right vertical supports are shown as thick vertical lines. The interior of the frame is white.

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

322.05

2965.88